Agency Report of: Public Official Appointments

Δ	P ₁	ıh	lic	Do	r i	ım	en	1

	ublic Official Appoint	unents			A F	ublic Document					
1.	Agency Name	Land Holden I. Brid. Hernitowick Stratter (1994) and the part of t				California 806					
	Local Agency Formation Co	ommission of Santa Clara County									
	Division, Department, or Reg					For Official Use Only					
	Designated Agency Contact	(Name, Title)									
	Emmanuel Abello, LAFCO	Clerk			***************************************						
	Area Code/Phone Number	[E-mail		4		Date Posted:					
	408/299-6415	emmanuel@abello@ceo.sccgov.org		Page 1 of	1	March 4, 2014 (Month, Day, Year)					
2.	Appointments										
	Agency Boards and	Name of Appointed Person		Appt Date and	Per Me	eting/Annual Salary/Stipend					
	Commissions		2000	Length of Term							
	Finance Committee	I half Comunic			▶ Per Meeting: \$100.00						
		Name Hall, Sequoia		2 / 05 / 14 Appt Date							
					ŀ	ted Annual:					
		Alternate, if any(Last, First)		1 year	\$2,001-\$3,000						
				Length of Term		\$1,001-\$2,000					
	Finance Committee	Name Khamis, Johnny (Last, First)			▶ Per Meeting: \$ 100.00						
	I mance Committee					Frei Meeung. V					
				Appl Date	Estimated Annual:						
		Alternate, if any(Last, First)	_	1 year	⊠ \$0-\$1	,000					
		(Last, First)		Length of Term	\$1,00	01-\$2,000 🔲					
						Other					
	Finance Committee	Name Abe-Koga, Margaret				400.00					
	Finance Committee			02 / 05 / 14		▶ Per Meeting: \$100.00					
				Appt Dale	▶ Estima	ted Annual:					
		Alternate, if any	_ -	1 year	⊠ \$0-\$1						
		(Last, First)		Longth of Term							
					\$1,00	01-\$2,000 LJ					
		Name(Lest, First)	_ •		▶ Per Me	eting: \$					
		(Lasi, First)		Appl Date	Estimated Annual:						
		Alternate, if any	_ }		☐ \$0-\$1	,000					
		(Lest, First)		Length of Term	\$1,00	11-\$2,000					
					E-100	Other					
3.	Verification	J	1	***************************************	and a second sec	ett tetes kinn ossanning kinn primaga primaga primaga kinn kinn kinn kinn tetes til statisti ti					
•		ulation 18705,5. I have verified that the appointment and inf	ormation	identified above is tru	e to the bes	st of my information and belief.					
	Malanhanla	L	LAFCO Executive Officer March 4, 2014								
	Signature of Agency Head or Designe	e Print Name		Title		(Month, Day, Year)					
	/										
	Comment:										